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IMPROVISING IN THE HOME¹

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While it is true that the art of nursing consists in making a patient comfortable and carrying out the doctor's orders conscientiously and intelligently, under some conditions the private duty nurse has a trying time to keep up with the art, with the facilities at hand.

In the modern home of today where so often the nurse is called, she has no trouble, as she usually finds all necessary articles at her disposal, or they can be had for the asking. To the nurse called to a home in the rural districts, miles from a drug store, it is difficult, or even in a town where supplies can be had, the money and credit may both be wanting. Even in the home of wealth it is more to the nurse's credit to keep down expenses, than to be the cause of large bills of any kind. It is, therefore, the duty of the private nurse and sometimes of the hospital nurse to use brains and tact and to improvise when necessary. If a nurse is thoroughly or even partially equipped, her troubles are lessened, but among the very poor, whether in public health, charity, or private work, she reaches the climax of her woes when she goes to a case armed with only a clinical thermometer. Finding orders for various forms of treatment, she has no time to stand idly by and say, "I can't carry out the doctor's orders; I have nothing to work with." She should put on her thinking cap.

The fountain syringe is the nurse's best friend, it can be used to irrigate any surface and most cavities of the body. The one the family possesses may be an ancient relic, the bag leaking, but if the tubing is fairly good, she can make all kinds of devices with it. With a rectal or douche nozzle, tubing, a funnel and a pitcher, she can give rectal or vaginal medication. In extreme cases, she can use the tubing without a nozzle. If no pitcher is available, she can use anything from which a solution can be poured. If no funnel is to be found, a coffee or teapot will serve if the tubing is slipped over the spout.

The tubing can also be used in washing out the stomach, or as a tourniquet. With the aid of a catheter, a funnel and pitcher, the bladder can be irrigated. It may be superfluous to add that any of the above improvised articles should be boiled before using.

¹ Read at the sixth annual meeting of the Mississippi State Association of Graduate Nurses, Natchez, October 30, 1916.

The discarded hot water bag, with the washers lost or minus the stopper, and with, perhaps, a few holes in the bag proper, may be utilized by partially filling it with hot salt, bran, meal, or sand, as there is no danger of leakage if only the washer is missing, for paper, cotton, or a cork may be substituted as a stopper. The holes can be covered with adhesive plaster, or a thin cover over the bag will prevent leaking.

Dry heat can also be applied by means of bags made from any material thick enough to keep any of the above ingredients from coming through, or by glass bottles filled with hot water and tightly corked, or by hot plates, irons, or bricks, covered to keep the patient from being burned.

Cold applications can be applied by means of cloths wrung out of cold or ice water and changed frequently, or ice water in the hot water bottle in the absence of an ice bag.

Several thickness of newspapers or magazines will substitute for a rubber sheet. White oilcloth is also satisfactory if it can be purchased. A Kelly pad can be made of several thicknesses of paper, or a sheet rolled into shape and covered with rubber sheeting or oilcloth. She may improvise a bed or douche pan by getting a long baking pan from the kitchen, putting a flat piece of board over one-third or one-half of the top.

Mustard plaster or any plaster not too thin can be applied between layers of brown, or newspaper.

In many cases where glycerine can not be purchased, or the nurse has not the time to wait, cooking oil, melted butter, or unsalted lard, heated, will substitute for a glycerine enema.

Murphy drip can be regulated with an ordinary fountain syringe by partially clamping the tubing with a forceps, or tying a knot in it, tightening to regulate the flow.

A good air cushion for small surfaces is a hot water bag partially filled with air. Mend the leak in the air cushion with adhesive, or improvise by making a ring of rolled cotton, horse hair, straw, or even a sheet formed into a circular pad, having a hole in the center and wound around with a bandage to keep in place.

In filling an air cushion or Kelly pad with air, if the mouth has to be used, protect yourself by using a small piece of gauze or any clean thin material that air can penetrate over the opening.

Pressure from bed clothing in fracture cases, etc., can be relieved by making a cradle of two chairs placing the backs uppermost and tying the legs to the sides of the bed. This is a rather clumsy affair but chairs can usually be had when other things are lacking. Halves of barrel hoops with a string fastened to each end and tied to the sides of the bed, using about three halves, will also make a good cradle.

If the foot of the bed is low, use a piece of board the width, but several inches higher than, the bed and fasten to keep in place. Let the top bed covering come over the improvised footboard.

A straight-back chair answers for a back rest, and takes the place of many pillows. A clothes horse covered with a sheet makes a very good screen.

A towel will always answer for a stupe wringer, or a lemon squeezer or meat press will serve for a stupe wringer when hot compresses are to be applied to the eye, or any small surface, and must be frequently changed.

Mosquito netting can be used to screen doors and windows in the absence of screens. Boiling water is always a safe disinfectant, a coal-oil lamp will take the place of an alcohol lamp.

In the absence of a steam inhaler, medicated substances may be inhaled by using a tea or coffee pot standing over a lamp, the spout turned toward the patient, or put the solution hot into a pitcher or pan and cover with perforated paper. Instruct the patient to breath naturally, taking the vapor through the mouth, exhaling through the nose. Inhalation of moist air in a room can be accomplished by means of a kettle of boiling water or by placing small pieces of slaked lime in pans of water.

In giving a vapor bath, if a lamp or oil stove is not available, hot bricks or plates, covered with wet flannel, or cloth, will make steam. Set the cloth covered plates, or bricks in dishes or plates around the patient under the bed clothing, but not near enough to cause burns.

If the patient is able to sit up, use a cane bottom chair, and after removing his clothing, have him sit in the chair; under it have a kettle of boiling water over a lamp, or use a pan of boiling water. Fasten blankets from his neck, entirely covering both patient and chair. Keep the feet in hot water, as this will hasten the action of the skin.

A nurse can always find something to use in bathing a patient, even if she has to do as I once did, get the yellow mixing bowl used for mixing biscuit, as a wash bowl was unknown.

In conclusion, a nurse should never think any task too menial to be performed, or refuse to help out in an emergency (if the patient's condition will allow) when the maid fails to appear. The family will always remember that the nurse was not too good to help with breakfast or in any way do what she could to make herself useful.